USAA STP SCU INLEX FUND USAA TOTAL METERS USAA TOTAL METERS	USAA Gawin Fund	136	s of band, 2	Runtal property 85747 8148 S. Laiburn Lukun Tusan X2		DC, Examples: Simon & Schuster	a detailed di ase refer to t	accounts: and any financial interest in, or income derived from, a federal retirement program, including the Thriff Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held with your spouse (JT), in the optional column on the far left.	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in personal checking or savings	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental or other real property held for investment, provide a complete address.	provide only the name of the institution holding the account and its value at the end of the reporting period.	For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed.	Provide complete names of stocks and mutual funds (do not use ticker symbols).	the end of the reporting bettout, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at	Asset and/or Income Source	BLOCK A
* *	*	×	*	*	×	Indefinite	\$1,0 \$15 \$ \$50 \$10 \$25 \$50 \$1,0 \$5,0 \$25	ne - \$1,000 .001 - \$15,000 .001 - \$50,000 .001 - \$100,000 .001 - \$250,000 .001 - \$500,000 .001 - \$5,000,00 .000,001 - \$5,000,00 .000,001 - \$25,000 .000,001 - \$50,000 .000,001 - \$50,000	,000		(A B C D E F G H I J K L	reporting year and is included only because it generated income, the value should be "None."	If an asset was sold during the	valuation method other than fair market value, please specify the	Indicate value of asset at close of reporting year. If you use a	Value of Asset	BLOCK B
××	× :	×.	X	*	×	Royalties	NOI DIV REI INT CAF EXC	NE IDENDS		Farm Incom	e)		reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	plans or IRAs), you may check the "None" column. Dividends, inter-	allow you to choose specific investments or that generate tax-deferred income (such as 401(k)	Check all columns that apply. For retirement accounts that do not	Type of Income	BLOCK C
× × ×		×	×	>	×	×	\$20 \$2,4 \$5,6 \$15 \$50 \$10 \$1,4 Ove Nor \$1,4 \$20 \$1,4 \$2,5 \$5,5 \$5,5	- \$200 1 - \$1,000 001 - \$2,500 001 - \$5,000 001 - \$15,000 ,001 - \$50,000 ,001 - \$100,000 0,001 - \$1,000,00 0,001 - \$5,000,00 000,001 - \$5,000,00	000		Current rear		gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	other assets, indicate the cate by checking the appropri	ate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column.	For retirement accounts that do not allow you to choose specific investments or that gener-	Amount of Income	BLOCK D

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed) SP, Ξ 8 USAA CHEKING + Sawings Service Credit-Union アマス Asset and/or Income Source to same Typermatimet BLOCK A None ➣ В \$1 - \$1,000 × × × X \$1,001 - \$15,000 O × × \$15,001 - \$50,000 D Value of Asset Ш \$50,001 - \$100,000 **BLOCK B** ı \$100,001 - \$250,000 ଦ \$250,001 - \$500,000 _ _ _ \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 ㅈ \$25,000,001 - \$50,000,000 Over \$50,000,000 × 25 NONE × × DIVIDENDS × RENT Type of Income X INTEREST × BLOCK C **CAPITAL GAINS** >< **EXCEPTED/BLIND TRUST** Other Type of Income (Specify: e.g., Partnership Income or Farm Income) X \succ × × × `*< None メ メ \$1 - \$200 × SZ, Marka E. III IV V VI VII VIII IX X XI \$201 - \$1,000 **Current Year** \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 -- \$50,000 \$50,001 - \$100,000 Amount of Income \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 BLOCK D Over \$5,000,000 \mathbf{x} None **X** 160 \$1 - \$200 × X \times × × \$201 - \$1,000 **Preceding Year** × \$1,001 - \$2,500 \$2,501 ~ \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000

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SCHEDULE III — LIABILITIES

Name Martha & McSally

Page 4 of 4

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount ling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000. ture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibowed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furni-

				SP, DC, JT
	USAA Home Equity Live of Credit ma 2006	Bunk of Amonia Home Lains out awa	Example: First Bank of Wilmington, DE	Creditor
	MAR ZCOG	act awa	May 1998	Date Liability Incurred mo/year
	BIGS 5. Cot bury Way The son AZ	margage on 8148 sicarching	Mortgage on 123 Main Street, Dover, DE	Type of Liability
				\$10,001 \$15,000
		×		\$15,001— m
				\$50,001— \$100,000
ļ	×		×	\$100,001— \$250,000
				\$250,001 m
				\$250,000 m \$250,001 m \$500,000 m \$1,000,000 m
				40,000,000
				\$5,000,001— ±
				\$25,000,001— \$50,000,000
				Over \$50,000,000

SCHEDULE IV — POSITIONS

prise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. cer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enter-Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an offi-

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization); and positions solely of an honorary nature

and positions solely of an individity flattice.	iature.
Position	Name of Organization
	NA

Use additional sheets if more space is required.